## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		110.120		PAGE 3 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
DSCC				C C00042366
				0 000042000
Check if 24-hour report 48-hour report	X New rep	port Amends repo		M / D = D / Y = Y = Y
Full Name of Payee			Date of	of Public Distribution/Dissemination
Great American Media			М	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3050 K St NW			Amou	nt
Ste 100	01-1-	<b>-</b> 0 1		120750.00
City	State Zip Code  DC 20007-5161			129750.00 action ID : 500011744
Washington				of Disbursement or Obligation
Purpose of Expenditure Media Buy		Category/ Type	М	10 31 / 2022
Name of Federal Candidate		Support	Office Sough	t: House District: 00
LAXALT, ADAM, , ,		<b>x</b> Oppose	Preside	
Calendar Year-To-Date	12371714.50 Dis 202		Disbursemen	t For: Primary General
Per Election for Office Sought				ther (specify) ▶
Full Name of Payee			Date	of Public Distribution/Dissemination
MVAR Media			IV	11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1421 Prince St			A mou	
Ste 320			Amou	nt
City	State	Zip Code		65000.00
Alexandria	VA	22314-2805		ction ID: 500011745 of Disbursement or Obligation
Purpose of Expenditure Media buy		Category/ Type		11 01 2022
Name of Federal Candidate		<b>✗</b> Support	Office Sough	t: House District: 00
FETTERMAN, JOHN, KARL, ,		Oppose	Preside	DA
Calendar Year-To-Date Per Election for Office Sought		4814743.27	Disbursemen 2022	t For: Primary   ✓ General  ther (specify)
				tiler (specify) •
(a) SUBTOTAL of Itemized Independent Expendit	tures		•	194750.00
(b) SUBTOTAL of Unitemized Independent Exper	nditures		·· • [	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized			
Wright, Allison, , ,	[Electroi	nically Filed] Date	M M /	02 / 2022
Signature				